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Sent: Wednesday, August 30, 2017 2:31 PM

To: Credible Documentation

Subject: Credible Payer and Billing News: August 2017



Behavioral Health Software



Credible Payer and Billing News: August 2017

DEAR CREDIBLE,

Welcome to August's listing of Payer and Billing news!

Based on Partner surveys and user group feedback, Credible is now providing monthly updates on billing and payer, clinical, and industry news to help keep our Partner community up-to-date. You can find all previous updates for these newsletters in Credible Help under General Information > Release Notes and Communications.

Payer Announcements

Arizona

834 Enrollment File

 Credible is happy to announce that the 834 Enrollment file is now available for use! Should your Agency be considered an Intake Agency, you will need to submit the 834. Some configuration changes are needed to begin sending enrollment files; please enter a task ticket and a Billing Specialist will walk you through the process.

Targeted Investments

- The TI program is a one-time opportunity to support integrated and coordinated care service delivery in AZ. TI provides financial incentives to eligible AHCCCS providers to develop systems for Integrated Care. The deadline to apply to participate in the Targeted Investment Program has passed. AHCCCS will notify applicants regarding acceptance into the program, as well as guidance in the upcoming weeks. Please see this link for additional information.
- The Targeted Investment Program will run from October 1, 2017 through September 30, 2021. TI participants will receive payment following acceptance into the program and for the next two years, Participants are required to implement the core components. Milestone measurement is due September 30th of the respective Milestone Measurement periods (First deadline 9/30/2018). Some examples of Measurement Milestones include:
 - Utilize a behavioral health integration toolkit.
 - Implement the use of an Integrated Care Plan.
 - Identify protocols for covering referrals, crises, provider-to-provider consultation.
- AHCCCS MCO Billing policies and procedures for services will not change under the TI program.

Arkansas

Arkansas Medicaid Management Information System

- MMIS is slated for delivery in Q4 of 2017. During early testing, MMIS will accept Chargeable claims, but not Reportable claims. This sometimes requires a quick change to the EDI configuration to begin to submit chargeable claims only. Should a Partner receive a rejection upon testing, please enter a task ticket, and a Billing Specialist will walk you through the appropriate steps.
- Please note that Reportable claims or Encounter Data is often tied to State Reporting. Due to this, Credible strongly encourages Agencies to review their specific needs in terms of submission, prior to making configuration changes.
- MMIS eBlast: Did you know that MMIS will provide an email blast with the latest updates? To sign up for these messages, please <u>click here</u>.
- Medical Assistance Provider Incentive Repository (MAPIR) is now accepting
 Program Year 2017 applications. If you have received a payment for Meaningful Use
 prior to 2017, you must report a full year of CQM data. Please see this link for additional
 details.

Indiana

• Indiana Medicaid

 Credible is happy to announce that we are an approved vendor with Indiana Medicaid. Rather than submitting 837 files to Indiana Medicaid through a Clearinghouse intermediary, Partners are now able to obtain an EDI relationship directly with Indiana Medicaid, allowing submission of files through their Medicaid portal.

Ohio

Behavioral Health ReDesign

- The Go Live date of 1/1/2018 was announced by OH Medicaid.
- o The Medicaid Carve initiative has been delayed and is now slated for 7/1/2018.
- In preparation for the new Go Live date, Partners are encouraged to start configuration efforts in October 2017.
- Credible Billing Specialists will continue to attend the EDI workshops, making adjustments to the Configuration Guide as final changes are solidified.
- If your Agency would like Credible's assistance in the configuration of the BH redesign, or to receive additional training on configuration and workflow, please reach out to your PRM before October 1, 2017. Please note: A separate order form for consulting will apply.

Virginia

CCC Plus

- CCC Plus is a new Medicaid program that provides medical, behavioral substance use disorder, and long-term services and support under one program.
 It is currently launching in the Tidewater region. Areas of configuration consideration include:
 - Ensuring EDI enrollment is completed for the new MCOs, if your Agency is not already contracted with the MCOs. This also includes the creation of a Billing Office Claim Config line to support the new EDI enrollment (if applicable).
 - Adding a new Billing Payer (utilizing the Payer's companion guide) if the MCO is new to your organization.
 - Updating Billing Matrix lines to set the MCOs as Allowed Payers.
 - Ensuring impacted clients have new insurance records in Credible based on the MCO they are now assigned to.
 - Obtain authorizations (if applicable), and enter new authorization records into Credible.
 - Verify eligibility.

Should a Partner require assistance or have questions regarding CCC Plus and how to configure in Credible, please enter a task ticket and a Billing Specialist will be happy to assist you.

CMS

- CMS Quality Payment Program listserv: Partners reporting MIPS/MACRA are encouraged by CMS to sign up for this new listserv. Per the CMS Daily Digest Bulletin:
 - 'The Quality Payment Program's first performance period begin on January 1, 2017 and ends on December 31, 2017. Participation in MIPS can start as early as January 1, 2017 or as late as October 2, 2017. The first payment adjustments based on performance go into effect on January 1, 2019. Subscribe to the Quality Payment Program listsery to receive reminders for all of these important deadlines.'
 - <u>Click here</u> to subscribe to the reminders. Go to the bottom of the page to find the subscription box.

Enhancement Updates

 Credible Integrated Care is coming soon, with a targeted release of phase one in December 2017. More information will become available as development and testing progresses.

Should you have any questions, please open a task ticket or contact a Partner Service Coordinator at 301-652-9500 for assistance.

Thank you for reading, and thank you for your Partnership!

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Mission: Improve the quality of care and lives in Behavioral Health for clients, families, providers and management.

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